



**CONTAINS CONFIDENTIAL BUSINESS INFORMATION**

January 23, 2019

Ms. Shaja Joyner, PM 20  
Office of Pesticide Programs (7540P)  
U.S. Environmental Protection Agency  
Document Processing Desk (REGFEE)  
Room S-4900, One Potomac Yard  
2777 South Crystal Drive  
Arlington, VA 22202-4501

**RE:     *Submission of a Registration Application for A374.01 [ABN: Cryder]  
          (EPA File Symbol 91234-XXX)***

Dear Ms. Joyner:

Atticus, LLC is submitting an EPA registration application for the end use product A374.01, containing the active ingredient sulfosulfuron. [REDACTED]

[REDACTED] please find enclosed the following documentation in support of this registration application:

- Application for Pesticide Registration (EPA Form 8570-1);
- Confidential Statement of Formula (EPA Form 8570-4);
- Formulator's Exemption Statement (EPA Form 8570-27);
- Proposed A374.01 Label;
- PRIA 3 Category R300 Payment Receipt; and
- [REDACTED]

Please note that the information in this letter is considered ***Confidential Business Information*** and must not be disclosed to any party outside of EPA. If you have any questions regarding this submission, please contact me at [Dave.Bolin@AtticusLLC.com](mailto:Dave.Bolin@AtticusLLC.com)

Respectfully submitted,

A handwritten signature in blue ink that reads 'Dave G. Bolin'.

Dave G. Bolin, Ph.D  
Vice President - Regulatory Affairs



EPA

United States  
**Environmental Protection Agency**  
 Washington, DC 20460

☒ Registration  
☐ Amendment  
☐ Other

OPP Identifier Number

**Application for Pesticide - Section I**

1. Company/Product Number <b>Atticus, LLC / 91234-XXX</b>	2. EPA Product Manager <b>S. Joyner</b>	3. Proposed Classification  <input checked="" type="checkbox"/> None <input type="checkbox"/> Restricted
4. Company/Product (Name) <b>Atticus, LLC/ A374.01 [ABN: Cryder]</b>	5. PM # <b>20</b>	
5. Name and Address of Applicant (Include ZIP Code) <b>Atticus, LLC</b> <b>5000 CentreGreen Way, Suite 100</b> <b>Cary, NC 27513</b>		6. <b>Expedited Review.</b> In accordance with FIFRA Section 3(c)(3)(b)(I), my product is similar or identical in composition and labeling to:  EPA Reg. No. <span style="background-color: black; color: black;">[REDACTED]</span> Product Name <span style="background-color: black; color: black;">[REDACTED]</span>
<input type="checkbox"/> Check if this is a new address		

**Section II**


<input type="checkbox"/> Amendment - Explain below.	<input type="checkbox"/> Final printed labels in response to Agency letter dated XX-XX-XX
<input type="checkbox"/> Resubmission in response to Agency letter dated XX-XX	<input checked="" type="checkbox"/> "Me Too" Application
<input type="checkbox"/> Notification - Explain below.	<input type="checkbox"/> Other - Explain below.

Explanation: Use additional page(s) if necessary. (For section I and Section II.)

**New Product Submission: R300 application for a new end-use product** [REDACTED]**Dave.Bolin@AtticusLLC.com****Section III**

1. Material This Product Will Be Packaged In:			
Child-Resistant Packaging <input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Water Soluble Packaging <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Type of Container <input type="checkbox"/> Metal <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) Plastic Bag
*Certification must be submitted		If "Yes" Unit Packaging wgt. No. per Container	If "Yes" Package wgt. No. per Container
3. Location of Net Contents Information <input checked="" type="checkbox"/> Label <input type="checkbox"/> Container	4. Size(s) Retail Container 20 oz	5. Location of Label Directions <input checked="" type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product	
6. Manner in Which Label is Affixed to Product <input type="checkbox"/> Lithograph <input type="checkbox"/> Other <input checked="" type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled			

**Section IV**

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)		
Name Dave G. Bolin, Ph.D.	Title Vice President – Regulatory Affairs	Telephone No. (Include Area Code) 984-465-4754
<b>Certification</b> I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.		6. Date Application Received <b>(Stamped)</b>
2. Signature 	3. Title Vice President – Regulatory Affairs	
4. Typed Name: Dave G. Bolin, Ph.D.	5. Date: January 23, 2019	

\*Claimed confidential by submitter\*



United States  
**Environmental Protection Agency**  
 Washington, DC 20460  
**Formulator's Exemption Statement**  
*(40 CFR 152.85)*

**Applicant's Name and Address**

**Atticus, LLC**  
**5000 CentreGreen Way, Suite 100**  
**Cary, NC 27513**

**EPA File Symbol/Registration Number**

91234-XXX

**Product Name**

A374.01

**Date of Confidential Statement of Formula (EPA Form 8570-4)**

1-23-2019

As an authorized representative of the applicant for registration of the product identified above, I certify that:

(1) This product contains the following active ingredient(s):

**Sulfosulfuron**

(2) Of these, each active ingredient listed in paragraph (4) is present solely as the result of the use of that active ingredient in the manufacturing, formulation or repackaging another product which contains that active ingredient which is registered under FIFRA Section 3, is purchased by us from another producer, and is labeled for at least each use for which my product is proposed to be labeled.

(3) Indicate by checking (A) or (B) below which paragraph applies:

☒ (A) An accurate Confidential Statement of Formula (EPA FORM 8570-4) for the above identified product is attached to this statement. That formula statement indicates, by company name, registration number, and product name, the source of the active ingredient(s) listed in paragraph (1)

**OR**

☐ (B) The Confidential Statement of Formula (CSF) (EPA Form 8750-4) referenced above and on file with the EPA is complete, current, and accurate and contains the information required on the current CSF

(4) The following active ingredients in this product qualify for the formulator's exemption

Source		
Active Ingredient	Product Name	Registration Number
Sulfosulfuron (75%)		

**Signature**
**Name and Title**

Dave G. Bolin, Ph.D.  
 Vice President – Regulatory Affairs

**Date**

1-23-2019